

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ORRINPAC

ADDRESS (number and street)

PO BOX 3986

☐ Check if different  
than previously  
reported. (ACC)

Washington

DC

20027

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00235572

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer STANLEY R. DE WAAL

Signature of Treasurer

STANLEY R. DE WAAL

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ORRINPAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2013

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y Y 2013</div>		<div>248953.80</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>199347.59</div>	
(c) Total Receipts (from Line 19) .....	<div>76025.00</div>	<div>140025.00</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>275372.59</div>	<div>388978.80</div>
7. Total Disbursements (from Line 31).....	<div>42212.58</div>	<div>155818.79</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>233160.01</div>	<div>233160.01</div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**ORRINPAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
03		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
03		31		2013

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

 (a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

28700.00

39700.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

28700.00

39700.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

47325.00

95325.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

76025.00

135025.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

76025.00

140025.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

76025.00

140025.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	27212.58	68573.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	27212.58	68573.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	85000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	2245.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	42212.58	155818.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42212.58	155818.79

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	76025.00	135025.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	76025.00	135025.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	27212.58	68573.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	27212.58	68573.79

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. The Cohen Group, LLC**

Mailing Address 500 8th Street, NW  
Suite 200

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 19 / 2013

**Transaction ID : 30319.C4236**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Cohen William**

Mailing Address 500 8th Street, NW  
Suite 200

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

The Cohen Group, LLC

CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 19 / 2013

**Transaction ID : 30319.C4237**

Amount of Each Receipt this Period

600.00

Memo

**[MEMO ITEM]**

Partnership->The Cohen Group, LLC PARTNERSHIP

Full Name (Last, First, Middle Initial)

## **C. Robert Tyrer**

Mailing Address 500 8th Street, NW  
Suite 200

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

The Cohen Group, LLC

Co-President & COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

03 / 19 / 2013

**Transaction ID : 30319.C4238**

Amount of Each Receipt this Period

200.00

Memo

**[MEMO ITEM]**

Partnership->The Cohen Group, LLC PARTNERSHIP

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

**A. James Bodner**

Mailing Address 500 8th Street, NW  
Suite 200

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Cohen Group, LLC

Occupation

Co-President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2013

**Transaction ID : 30319.C4239**

Amount of Each Receipt this Period

200.00

Memo

**[MEMO ITEM]**

Partnership-&gt;The Cohen Group, LLC PARTNERSHIP

Full Name (Last, First, Middle Initial)

**B. Mike Bertman**

Mailing Address 5908 Ashby Manor Place

City	State	Zip Code
ALEXANDRIA	VA	22310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Diageo Brands

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2013

**Transaction ID : 30319.C4228**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Sam Fox**

Mailing Address 7701 Forsyth Boulevard  
Suite 600

City	State	Zip Code
SAINT LOUIS	MO	63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Harbour Group

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

**Transaction ID : 30319.C4217**

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

**A. Dana Gordon**

Mailing Address 1041 Oxen Trail

City State Zip Code  
 PEBBLE BEACH CA 93953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 28 / 2013

Transaction ID : 30410.C4253

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Sarah Gordon**

Mailing Address 1041 Oxen Trail

City State Zip Code  
 PEBBLE BEACH CA 93953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PG Unified School District

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 28 / 2013

Transaction ID : 30410.C4254

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Gordon Gund**

Mailing Address 14 Nassau Street

City State Zip Code  
 PRINCETON NJ 08542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gund Investment Group

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 08 / 2013

Transaction ID : 30319.C4223

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. Llura Gund**

Mailing Address 14 Nassau Street

City State Zip Code  
 PRINCETON NJ 08542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The George Gund Foundation

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 08 / 2013

Transaction ID : 30319.C4221

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. James Hawkins**

Mailing Address 2604 N Nelson Street

City State Zip Code  
 ARLINGTON VA 22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Alpine Group

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 08 / 2013

Transaction ID : 30319.C4215

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. KATHLEEN KEMPER**

Mailing Address 4410 Massachusetts Avenue, NW  
 3rd Floor

City State Zip Code  
 WASHINGTON DC 20016-5561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KATHY KEMPER & COMPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 25 / 2013

Transaction ID : 30325.C4244

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. TOM C. KOROLOGOS**

Mailing Address 3150 South Street, NW

2A

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DLA Piper

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2013

Transaction ID : 30319.C4225

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. RICHARD E. MARRIOTT**

Mailing Address 10840 PLEASANT HILL DR

City

POTOMAC

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOST HOTELS & RESORTS

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2013

Transaction ID : 30328.C4252

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Glen Mason**

Mailing Address 2625 N. Pocomoke Street

City

ARLINGTON

State

VA

Zip Code

22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mason Consulting LLC

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2013

Transaction ID : 30325.C4240

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

**A. GEORGE R. SALEM**

Mailing Address 500 8th Street, NW  
Suite 210

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Law Offices of George R. Salem

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2013

**Transaction ID : 30319.C4233**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Guy Smith**

Mailing Address 352 North Street

City State Zip Code  
GREENWICH CT 06830-3930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Diageo Brands

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2013

**Transaction ID : 30325.C4243**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

28700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 23  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. ALLERGAN INC. PAC FOR EMPLOYEES PAC**

Mailing Address 2148 E. ORANGE VIEW LN

City State Zip Code  
 ORANGE CA 92867

FEC ID number of contributing  
federal political committee.

**C** C00292102

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **19** / **2013**

**Transaction ID : 30319.C4232**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. American Academy of Nurse Practitioners**

Mailing Address PAC  
 PO Box 40473

City State Zip Code  
 WASHINGTON DC 20016

FEC ID number of contributing  
federal political committee.

**C** C00358903

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4242**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. AMERICAN ASSN. OF NURSE ANESTHETISTS PA**

Mailing Address 25 MASSACHUSETTS AVE NW  
 SUITE 550

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00173153

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4241**

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN CHIROPRACTIC ASSOCIATION PAC**

Mailing Address 1701 CLARENDON BLVD.

City State Zip Code  
 ARLINGTON VA 22209

FEC ID number of contributing  
federal political committee.

**C** C00102764

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4248**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. AMGEN PAC**

Mailing Address ONE AMGEN CENTER DRIVE

City State Zip Code  
 NEWBURY PARK CA 91320-1789

FEC ID number of contributing  
federal political committee.

**C** C00251876

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4250**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. BOSTON SCIENTIFIC CORP. PAC**

Mailing Address ONE BOSTON SCIENTIFIC PL

City State Zip Code  
 NATICK MA 01760

FEC ID number of contributing  
federal political committee.

**C** C00357863

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4246**

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. Distilled Spirits PAC**

Mailing Address 1250 I Street, NW  
Suite 400

City State Zip Code  
WASHINGTON DC 20005-5977

FEC ID number of contributing  
federal political committee.

**C** C00030734

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **19** / **2013**

**Transaction ID : 30319.C4229**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. DLA PIPER PAC**

Mailing Address 500 8TH STREET, NW

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00151340

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**03** / **19** / **2013**

**Transaction ID : 30319.C4235**

Amount of Each Receipt this Period

2000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. EDWARDS LIFESCIENCES PAC**

Mailing Address ONE EDWARDS WAY

City State Zip Code  
IRVINE CA 92614

FEC ID number of contributing  
federal political committee.

**C** C00411900

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03** / **19** / **2013**

**Transaction ID : 30319.C4231**

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

4500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. EISAI INC. PAC**

Mailing Address 100 Tice Boulevard

City

Woodcliff Lake

State

NJ

Zip Code

07677

FEC ID number of contributing  
federal political committee.

C

C00429886

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2013

**Transaction ID : 30319.C4222**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. EMD SERONO, INC. PAC**

Mailing Address One Technology Place

City

ROCKLAND

State

MA

Zip Code

02370-1071

FEC ID number of contributing  
federal political committee.

C

C00258236

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2013

**Transaction ID : 30319.C4220**

Amount of Each Receipt this Period

3000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. HEALTHCARE DISTRIBUTION MANAGEMENT ASSN**

Mailing Address 901 NORTH GLEBE ROAD

SUITE 1000

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

C00247569

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2013

**Transaction ID : 30319.C4224**

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

6500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. KOCH INDUSTRIES, INC PAC**

Mailing Address 600 14TH ST NW, STE 800

City  
WASHINGTON

State Zip Code  
DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00236489

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4251**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. NAFCU/PAC**

Mailing Address 3138 10th Street North

City  
ARLINGTON

State Zip Code  
VA 22201-2149

FEC ID number of contributing  
federal political committee.

**C** C00040659

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **08** / **2013**

**Transaction ID : 30319.C4216**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. ORTHOPAEDIC PAC**

Mailing Address 317 MASSACHUSETTES AVE, NE

City  
WASHINGTON

State Zip Code  
DC 20002

FEC ID number of contributing  
federal political committee.

**C** C00343137

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4245**

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. Pepsico, Inc. Concerned Citizens Fund**

Mailing Address 700 Anderson Hill Road

City State Zip Code  
 PURCHASE NY 10577

FEC ID number of contributing  
federal political committee.

**C** C00039321

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4249**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. PFIZER PAC**

Mailing Address 235 EAST 42ND STREET

City State Zip Code  
 NEW YORK NY 10017

FEC ID number of contributing  
federal political committee.

**C** C00016683

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **04** / **2013**

**Transaction ID : 30307.C4213**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. REALTORS PAC**

Mailing Address 430 N. MICHIGAN AVE

City State Zip Code  
 CHICAGO IL 60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **19** / **2013**

**Transaction ID : 30319.C4234**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

11500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

## **A. REITPAC REAL ESTATES INVESTMENTS TRUST**

Mailing Address 1875 I ST, NW  
SUITE 600

City State Zip Code  
WASHINGTON DC 20006-5413

FEC ID number of contributing  
federal political committee.

**C** C00303339

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

**03** / **04** / **2013**

**Transaction ID : 30307.C4214**

Amount of Each Receipt this Period

325.00

In-Kind

Staff Resources

Full Name (Last, First, Middle Initial)

## **B. THE WALT DISNEY COMPANY EMPLOYEES PAC**

Mailing Address 425 3rd Street, SW  
Suite 1100

City State Zip Code  
WASHINGTON DC 20024

FEC ID number of contributing  
federal political committee.

**C** C00197749

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **19** / **2013**

**Transaction ID : 30319.C4230**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. WELLPOINT, INC. WELLPAC**

Mailing Address 120 MONUMENT CIR

City State Zip Code  
INDIANAPOLIS IN 46204-4903

FEC ID number of contributing  
federal political committee.

**C** C00197228

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **25** / **2013**

**Transaction ID : 30325.C4247**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7825.00

47325.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# ORRINPAC

### A. The Larrison Group LLC

Mailing Address PO Box 3926

City	State	Zip Code
Washington	DC	20027-

### Purpose of Disbursement Consulting

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Three 3x3 grids are shown, each representing a number using the letter 'M'.

- Grid 1 (03):** The top row contains 'M' in the first and third positions. The middle row is empty. The bottom row contains '0' in the first position and '3' in the second position.
- Grid 2 (08):** The top row contains 'D' in the first and third positions. The middle row is empty. The bottom row contains '0' in the first position and '8' in the second position.
- Grid 3 (2013):** The top row contains 'Y' in the first, third, fourth, and fifth positions. The middle row is empty. The bottom row contains '2' in the first position, '0' in the second position, '1' in the third position, and '3' in the fourth position.

Transaction ID : 30410.E2540

Amount of Each Disbursement this Period

12500.00

## CONSULTING

Full Name (Last, First, Middle Initial)

## B. ARISTOTLE

Mailing Address 205 Pennsylvania Ave, SE

City	State	Zip Code
WASHINGTON	DC	20003-

### Purpose of Disbursement Software

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : 30410.E2542

Amount of Each Disbursement this Period

575.00

SOFTWARE

Full Name (Last, First, Middle Initial)

**C. E. H. MURRAY GROUP, LLC**

Mailing Address 6510 ANNA MARIE COURT

City	State	Zip Code
MCLEAN	VA	22101-

Purpose of Disbursement	Reimbursement: See Below
-------------------------	--------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 30410.E2549

Amount of Each Disbursement this Period

13524.84

REIMBURSEMENT: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

26599.84



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# ORRINPAC

### A. Stein Eriksen Lodge

Mailing Address 7700 Stein Way

City	State	Zip Code
PARK CITY	UT	84060-5132

Purpose of Disbursement
Shipping

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 30410.E2555

Amount of Each Disbursement this Period

970.76

[MEMO ITEM]  
MEMO: SHIPPING

Full Name (Last, First, Middle Initial)

### B. Stein Eriksen Lodge

Mailing Address 7700 Stein Way

City	State	Zip Code
PARK CITY	UT	84060-5132

Purpose of Disbursement
Hotel Rooms

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '01' with 4 segments lit. The second display shows '08' with 7 segments lit. The third display shows '2013' with 10 segments lit.

Transaction ID : 30410.E2556

Amount of Each Disbursement this Period

1034.82

**[MEMO ITEM]**  
MEMO: HOTEL ROOMS

Full Name (Last, First, Middle Initial)

### C. Stein Eriksen Lodge

Mailing Address 7700 Stein Way

City	State	Zip Code
PARK CITY	UT	84060-5132

Purpose of Disbursement	PAC Event Dinner
-------------------------	------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 30410.E2557

Amount of Each Disbursement this Period

10951.21

**[MEMO ITEM]**  
MEMO: PAC EVENT DINNER

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

**A. REITPAC REAL ESTATES INVESTMENTS TRUST**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2013

Mailing Address 1875 I ST, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

Purpose of Disbursement  
Staff Resources

Candidate Name

Category/  
Type**Transaction ID : 30307.C4214IK**

Amount of Each Disbursement this Period

325.00
--------

IN KIND: STAFF RESOURCES

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

325.00
--------

26924.84
----------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ORRINPAC**

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN SENATORIAL COMM.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2013

Mailing Address 425 SECOND STREET, NE

City	State	Zip Code
WASHINGTON	DC	20002-

**Transaction ID : 30319.E2539**Purpose of Disbursement  
2013 CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

**NATIONAL REPUBLICAN SENATORIAL COMMITTEE**Category/  
Type

15000.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

2013 CONTRIBUTION

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

15000.00